

PTO/SB/22 (12-04)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		RECEIVED CENTRAL FAX CENTER AUG 20 2008
Application Number: 10/043,657		Docket Number: 729-174 Filed: January 8, 2002
For: HYDRATION POUCH WITH INTEGRAL THERMAL MEDIUM		
Art Unit: 3782	Examiner: Lester L. Vanterpool	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$

- Applicant claims small entity status. See 37 CFR 1.27.
 - A check in the amount of the fee is enclosed.
 - Payment by credit card. Form PTO-2038 is attached.
 - The Director has already been authorized to charge fees in this application to a Deposit Account.
 - The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____. I have enclosed a duplicate copy of this sheet.
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

- applicant/inventor.
- assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration Number ____
- attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 44,331

Signature

August 20, 2008

Date

Peter A. Shaddock II

Typed or printed name

757-548-2323

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

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